



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E440757**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input checked="" type="checkbox"/>

TRIBAL RESERVATION ☐

CASE # **15-01681**

LOCAL AGENCY CODING ☐

TOTAL # OF UNITS **02** OBJECT STRUCK ☐

DATE OF COLLISION **07** - **06** - **2015** TIME (2400) **1842** COUNTY # **31** MILES ☐ N ☐ E ☐ IN ☒ S ☐ W ☐ OF **0664** CITY # ☐

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒
1 PL. N.E. BLOCK NO. ☒ **10500** MILE POST ☐

DISTANCE **50** **00** MILES ☐ N ☐ E ☐ FEET ☒ S ☐ W ☒ OF (REFERENCE OR CROSS STREET) **DAVIES RD**

UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE ☐

LAST NAME **UNKNOWN** FIRST NAME ☐ MIDDLE INITIAL ☐

STREET NEW ADDRESS ☐

CITY ☐ ST ☐ ZIP ☐

CDL ☐ RESTRICTIONS ☐ ENDORSEMENTS ☐

DRIVER'S LICENSE # ☐ STATE ☐ SEX **U** D.O.B. **MMDDYYYY** - ☐ - ☐

ON DUTY ☐ STATUS ☐ AIRBAG **9** RESTR. **9** EJECT **9** HELMET USE **9** INJURY CLASS **0** NATURE OF INJURIES ☐

LICENSE PLATE # ☐ STATE ☐ VIN# ☐

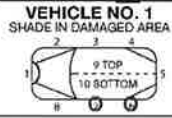
TRAILER PLATE # ☐ STATE ☐ TRAILER PLATE # ☐ STATE ☐

VEH. YEAR ☐ MAKE **BMW** MODEL **UNKNO** STYLE ☐ VEHICLE TOWED YES ☐ NO ☒ TOWED BY ☐ GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. ☐

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # ☐

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # ☐ CHARGE ☐



UNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE ☐

LAST NAME **UNKNOWN** FIRST NAME ☐ MIDDLE INITIAL ☐

STREET NEW ADDRESS ☐

CITY ☐ ST ☐ ZIP ☐

CDL ☐ RESTRICTIONS ☐ ENDORSEMENTS ☐

DRIVER'S LICENSE # ☐ STATE ☐ SEX **U** D.O.B. **MMDDYYYY** - ☐ - ☐

ON DUTY ☐ STATUS ☐ AIRBAG **9** RESTR. **9** EJECT **9** HELMET USE **9** INJURY CLASS **0** NATURE OF INJURIES ☐

LICENSE PLATE # **ASA2918** STATE **WA** VIN# **JK1TD66678B045329**

TRAILER PLATE # ☐ STATE ☐ TRAILER PLATE # ☐ STATE ☐

VEH. YEAR **2008** MAKE **CHEV** MODEL **AVEO** STYLE **4D** VEHICLE TOWED YES ☐ NO ☒ TOWED BY ☐ GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **STEPHEN RADEN 10526 1 PL. N.E. LAKE STEVENS WA 98258 D: 4258767039**

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO **UNK** & POLICY # ☐

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # ☐ CHARGE ☐



OFFICER'S NAME (PRINT) **RON BROOKS** BADGE OR ID # **013** AGENCY **WA0311900**



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E440757**

CASE # **15-01681**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		BRADEN STEPHANIE																	
ADDRESS & PHONE #		10526 1 PL. N.E. LAKE STEVENS WA 98258 4257505498																	
SEX		F		D.O.B.		MMDDYYYY		09		09		1989							
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)		STEVENS EMILY A																	
ADDRESS & PHONE #		10509 1 PL. N.E. LAKE STEVENS WA 98258 4257603027																	
SEX		F		D.O.B.		MMDDYYYY		05		01		1995							
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #																			
SEX				D.O.B.		MMDDYYYY													
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	

NARRATIVE

UNIT 1 drove westbound on 1 Pl. N.E. form Davies Road. then stopped in the 10400 block and backed up at a high rate of speed and slammed into the drivers side of Unit 2. Unit 2 was legally parked unoccupied. The force of the impact moved Unit 2 about 20 feet over the sidewalk and into the yard at 10526 1 Pl. N.E... Unit 1 quickly sped off Northbound on Davies Rd. Unit 1 left behind piecies of its tail light assembally. Unit 1 sustained damage to the drivers side rear. Unit 1 was described as a white BMW. There was white paint transfer on Unit 2. Unit 1 was occupied buy one male driver and one female passenger.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

RON BROOKS

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

07-08-15 03:10 AM

DATED

PLACE SIGNED

APPROVED BY

RON BROOKS 013

DATE

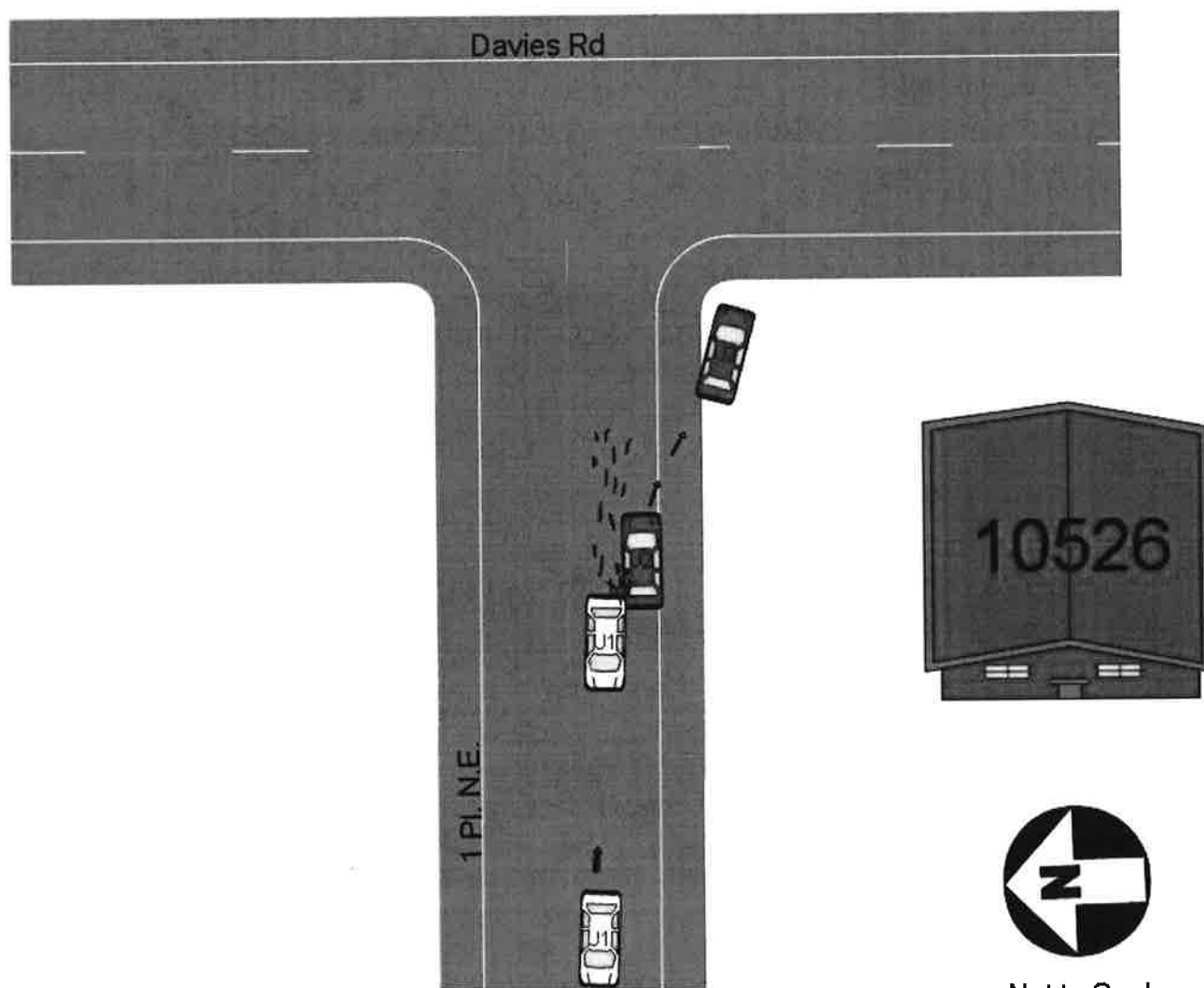
7/8/2015 3:11:07 AM

BADGE OR ID # **013**

ORI # **WA0311900**

TIME POLICE DISPATCHED **6:42 PM**

TIME POLICE ARRIVED **6:44 PM**



Not to Scale

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER 15-6168

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) STEVENS, Emily Ann	RACE CAU.	ETH	SEX F	DOB 05/01/95	AGE 20	HGT 53	WGT 100	HAIR BRN	EYES BLU
STREET ADDRESS 10509 1st PL NE		CITY LAKE STEVENS			STATE WA		ZIP 98258		RES. STATUS	
HOME PHONE		CELL PHONE 425-760-3027			PLACE OF EMPLOYMENT					
WORK PHONE		EMAIL ADDRESS Emily.com@comcast.net								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I saw a white beamer zoom up to the cop car then reverse. It looked like a darker skin man driving and a lady in the passenger seat. I heard a screech as he was reversing really fast then a bang.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE:	DATE SIGNED 7/6/15	LOCATION SIGNED LAKE STEVENS
OFFICER/NUMBER:	DATE SIGNED 11	LOCATION SIGNED 11

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ___ OF ___

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT



CASE NUMBER 15-01681

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Braden, Stephanie	RACE WHE	ETH	SEX F	DOB 9-9-89	AGE 25	HGT 5'5"	WGT 120	HAIR BLK	EYES BLU
STREET ADDRESS 10526 1st Pl NE		CITY Lake Stevens			STATE Wa		ZIP 98258		RES. STATUS RES	
HOME PHONE 425 816 7039		CELL PHONE 425-750-5498			PLACE OF EMPLOYMENT None					
WORK PHONE		EMAIL ADDRESS stephbraden@gmail.com								

I, Stephanie Braden, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

~~The car that~~ Our car is normally parked about on the street and about 20 ft forward in the sidewalk by the light pole is ~~the car with~~ a ~~grant~~ where the car ended up after having been hit. There is extensive damage along the drivers side

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 7-6-15	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER: 	DATE SIGNED "	LOCATION SIGNED "

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ___ OF ___

LAKE STEVENS POLICE EVIDENCE UNIT	Primary Officer/Badge Number <u>855 Brooks</u>	Case Number <u>15-01681</u>
Type of Crime: Felony / Misdemeanor (Circle)	Type of Case: <u>HIT & RUN</u>	Date/Time: <u>07-06-15 7000</u>

Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING

*Evi will be held until court dispo or when the Statute of Limitations has expired
*Found and Sfgk will be held for 60 days or 60 days past owner notification

Case # <u>15-01681</u>	Item # <u>1</u>	Item <u>PHOTO CD</u>	Brand Name		Storage Location		Disposition
	Action # <u>3</u>	Brand/Model/Caliber		(Further Description)			
		Serial #	Where Found	Weight of Narcotic			
		Owner's Name Address City State Zip Phone # Barcode goes here					
	Owner Signature/Other remarks /additional information/ special instructions						
	Item #	Item	Brand Name		Storage Location		Disposition
	Action #	Brand/Model/Caliber		(Further Description)			
		Serial #	Where Found	Weight of Narcotic			
		Owner's Name Address City State Zip Phone # Barcode goes here					
	Owner Signature/Other remarks /additional information/ special instructions						
	Item #	Item	Brand Name		Storage Location		Disposition
	Action #	Brand/Model/Caliber		(Further Description)			
		Serial #	Where Found	Weight of Narcotic			
		Owner's Name Address City State Zip Phone # Barcode goes here					
	Owner Signature/Other remarks /additional information/ special instructions						
	Item #	Item	Brand Name		Storage Location		Disposition
	Action #	Brand/Model/Caliber		(Further Description)			
		Serial #	Where Found	Weight of Narcotic			
		Owner's Name Address City State Zip Phone # Barcode goes here					
	Owner Signature/Other remarks /additional information/ special instructions						
	Item #	Item	Brand Name		Storage Location		Disposition
	Action #	Brand/Model/Caliber		(Further Description)			
		Serial #	Where Found	Weight of Narcotic			
		Owner's Name Address City State Zip Phone # Barcode goes here					
	Owner Signature/Other remarks /additional information/ special instructions						
Evidence Control Use Only:							
Received by Evidence:		NCIC/WACIC	✓	Date:	CAD/RMS Checked	ROUTING:	
Name: _____ # _____		NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room		
Date: _____ Time: _____		NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File		

Incident History for: #SS15013431

Case Numbers: \$SS15001681

Entered 07/06/15 18:42:19 BY SPCT08 SP0401
Dispatched 07/06/15 18:42:50 BY SPSC40 SP0274
Enroute 07/06/15 18:42:50
Onscene 07/06/15 18:44:39
Closed 07/06/15 18:59:14

Initial Type: COLP Initial Alarm Level: Final Alarm Level:

Final Type: COLP (COLLISION, PRIORITY) Pri: 1 Dispo: H

Police BLK: SS002 Fire BLK: AG1519 Map Page: 397G-1 Group: SS1 Beat: WEST

Src: T

Loc: 1 PL NE/N DAVIES RD ,LKS (V)

Loc Info:

Name: POOR, RILEY

Addr:

Phone: 4253152063

/1842 (SP0401) ENTRY , CC, 1 AGO, H AND R WITH PKED CAR
/1842 (SP0274) AGCADV , BOLO
/1842 VIEWED
/1842 (SP0401) SUPP TXT: RUN VEH IS WHI BMW N/L, LSH NB ON N DAVIES
/1842 (SP0274) DISPER 19S10 #SS13 BROOKS, SGT (RON)
/1844 (SP0401) SUPP TXT: PKED VEH IS GRY PC HATCHBACK N/L, RP IS PAS
SERBY, THINKS POSSIBLE RO OF PKED CAR IS WAITING
NEAR VEH ON S SIDE OF 1 PL NE

/1844 (SP0274) ONSCNE 19S10
/1845 (SP0401) SUPP NAM: POOR, RILEY,
PHO: 4253152063,
TXT: RP IS WITNESS ADV HE IS HEADING BACK TO LOC

/1847 (SP0274) MISC 19S10 , RUN VEH DRIVER BY DRKR SKIN, POSS HISP MALE
/1848 (*****) REMINQ 19S10 ASA2918
/1848 (SP0274) REMINQ 19S10 LIC, 19S10, ASA2918, , ,
/1851 MISC 19S10 , RUN VEH PASS REAR DAMAGE
/1856 (SP0200) ASNCAS 19S10 \$SS15001681
/1859 (SS13) *CLEAR 19S10 D/H
/1859 CLOSE 19S10